

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of
MARY ANN HERTZ,
Plaintiff,

Case Number: 08-cv-864

vs.

HUMANA HEALTH PLAN OF OHIO, LTD.,
d/b/a HUMANA INSURANCE COMPANY, et al.

Defendants.

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

Humana Insurance Company, incorrectly sued as Humana Health Plan of Ohio, Ltd.

NAME (Type or print) William A. Chittenden, III	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/William A. Chittenden	
FIRM CHITTENDEN, MURDAY & NOVOTNY, LLC	
STREET ADDRESS 303 W. Madison Street, Suite 1400	
CITY/STATE/ZIP Chicago, IL 60606	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 6183452	TELEPHONE NUMBER (312) 281-3600
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	